Image# 10931662441 107/207/20/120 20 : 18

## **FEC FORM 5**

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

League of Conservation Voters, Inc.  (b) Address (number and street)						
(c) City, State and ZIP Code Washington  DC 20036-  C Corporate filers only  Is the filer a qualified nonprofit corporation?  Individual filers only  Name of Employer  Occupation  4. TYPE OF REPORT (check appropriate boxes):  (a) April 15 Quarterly Report  July 15 Quarterly Report  October Quarterly Report  October Quarterly Report						
Washington  DC 20036-  2. Corporate filers only Is the filer a qualified nonprofit corporation?						
Corporate filers only   Is the filer a qualified nonprofit corporation?   Yes   No   No   Individual filers only   Name of Employer   Occupation						
2.   Corporate filers only   Is the filer a qualified nonprofit corporation?   Yes   No     Individual filers only   Name of Employer   Occupation						
Individual filers only  Name of Employer  Occupation  4. TYPE OF REPORT (check appropriate boxes):  (a)  April 15 Quarterly Report  July 15 Quarterly Report  October Quarterly Report						
4. TYPE OF REPORT (check appropriate boxes):  (a) April 15 Quarterly Report  July 15 Quarterly Report  October Quarterly Report						
(a) ☐ April 15 Quarterly Report ☐ 24-Hour Notice ☐ 48-Hour Notice ☐ July 15 Quarterly Report ☐ October Quarterly Report						
(a) ☐ April 15 Quarterly Report ☐ 24-Hour Notice ☐ 48-Hour Notice ☐ July 15 Quarterly Report ☐ October Quarterly Report						
(a) ☐ April 15 Quarterly Report ☐ 24-Hour Notice ☐ 48-Hour Notice ☐ July 15 Quarterly Report ☐ October Quarterly Report						
☐ July 15 Quarterly Report ☐ October Quarterly Report						
October Quarterly Report						
☐ January 31 Year-End Report						
(b) Is this Report an amendment? Yes No X						
5. COVERING PERIOD: FROM M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
THROUGH						
M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
6. TOTAL CONTRIBUTIONS						
G. TOTAL CONTINUOUS						
7. TOTAL INDEPENDENT EXPENDITURES						
Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.						
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE DATE						
Patrick Collins 10/20/2010						
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C 437g.						

 $For \ further \ information, \ contact:$ 

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

PAGE 2/2

FOR LINE 7 FOR FORM 5

NAM	E OF FILER (In Full)					
Le	ague of Conservation Voters, Inc.					
	full Name (Last, First, Middle Initial) of Payee New Media Firm Inc				Date	
	Mailing Address 1634 I St NW Ste 704				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
$\vdash$	Suite 704				4962.00	
	City Washington	State DC	Zip Code 20006-4000			
	Purpose of Expenditure Radio Ad		Category/ Type		ffice Sought: X House State: — State: —	VA
	Name of Federal Candidate Supported or Opp Rep. Tom S.P. Perriello	osed by Expenditure:			President District:	
	Calendar Year-To-Date Per Election for Office Sought		261364.00	1  _	sbursement For: Primary X General Definition of the Company Primary Pr	eral
	full Name (Last, First, Middle Initial) of Payee Vote Vets Action Fund, Inc.			•	Date	Y
	Mailing Address PO Box 10031				Amount	0
	City Portland	State OR	Zip Code 97296		150000.00	
F	Purpose of Expenditure		Catanami/	Off	ffice Sought: X House State: \( \)	./^
	Partner TV Ad Buy		Category/ Type		House State:	<u>v A</u>
	Name of Federal Candidate Supported or Opposed by Expenditure:				President District:	05
	Rep. Tom S.P. Perriello	DOCA BY Experience.			neck One: X Support Oppos	е
	Calendar Year-To-Date Per Election for Office Sought		261364.00	1  _	sbursement For: Primary X General Definition of the Company of the	eral
(а	a) SUBTOTAL of Itemized Independent Expe		154962.00			
(i	b) SUBTOTALof Unitemized Independent Ex	penditures			L	
(0	c) TOTAL Independent Expenditures (carry total from last page forward t				154962.00	